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| <h1 style="text-align: center;">TRANSMITTAL FORM</h1> <p style="text-align: center;"><i>(to be used for all correspondence after initial filing)</i></p> | | Application Number | 10/534,932-Conf. #3664 |
| | | Filing Date | May 13, 2005 |
| | | First Named Inventor | Joseph J. Kaplo |
| | | Art Unit | 1791 |
| | | Examiner Name | J. D. Sells |
| Total Number of Pages in This Submission | 3 | Attorney Docket Number | TXT-001CP |

| ENCLOSURES (Check all that apply) | | | | | | | | | | | | | | | | | | |
|---|---|--|---|-----------|---------------------|--|--|-----------|---------------------|--|--|--------------|-------------------|--|--|------|---------------|----------|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input checked="" type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please Identify below): | <div style="border: 1px solid black; padding: 5px;">Remarks</div> | | | | | | | | | | | | | | | |
| <div style="border: 1px solid black; padding: 5px;"> <p style="text-align: center;">SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</p> <table border="1" style="width: 100%;"> <tr> <td style="width: 20%;">Firm Name</td> <td colspan="3">GOODWIN PROCTER LLP</td> </tr> <tr> <td>Signature</td> <td colspan="3">/Andrew L. Jagenow/</td> </tr> <tr> <td>Printed name</td> <td colspan="3">Andrew L. Jagenow</td> </tr> <tr> <td>Date</td> <td>April 3, 2008</td> <td>Reg. No.</td> <td>51,842</td> </tr> </table> </div> | | | | Firm Name | GOODWIN PROCTER LLP | | | Signature | /Andrew L. Jagenow/ | | | Printed name | Andrew L. Jagenow | | | Date | April 3, 2008 | Reg. No. |
| Firm Name | GOODWIN PROCTER LLP | | | | | | | | | | | | | | | | | |
| Signature | /Andrew L. Jagenow/ | | | | | | | | | | | | | | | | | |
| Printed name | Andrew L. Jagenow | | | | | | | | | | | | | | | | | |
| Date | April 3, 2008 | Reg. No. | 51,842 | | | | | | | | | | | | | | | |